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7500 10/28/2010

NEW YORK, NY 100368403

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APPLICATION NO.

10/516 657

OSTROLENK FABER GERB & SOFFEN 1180 AVENUE OF THE AMERICAS

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ST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.				
Hajimc Yamada	P/2850-101	8759				

FILING DATE 12/01/2004 TITLE OF INVENTION: EXTERNAL MEDICINE FOR TREATING DERMATITIS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$755	\$300	\$0	\$1055	01/28/2011	1
EXAM	INER	ART UNIT	CLASS-SUBCLASS	1			
CHANNAVAJJALA,	LAKSHMI SARADA	1611	424-401000	_			
 Change of correspondence address or indication of "Fee Address" (37 CFR J. 53.3). Change of correspondence address (or Change of Correspondence Address form PTO/SB/12.2) attached. Fee Address' indication (or Tee Address' Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required. 		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OK, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		er a 2_OSTROLE	2 OSTROLENK FABER LLP		

FIRST NAM

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(B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent) : 🚨 Individual 🏚 Corporation or other private group entity 🚨 Government

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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United/States Patent and Traderpark Office. Date January 25, 2011

Authorized Signature ___ Robert C. Faber 24,322 Registration No. Typed or printed name _

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